Doncaster and Bassetlaw Teaching Hospitals
NHS Foundation Trust

Knowledge, Library & Information Service

INNOVATION & IMPROVEMENT BULLETIN

18TH JULY 2023



Professional Standards Authority strategic plan 2023 to 2026

JULY 18, 2023

The Professional Standards Authority Strategic Plan 2023-26 sets out the approach to delivering our statutory duties effectively and efficiently. It also outlines our commitment to continuous improvement in our processes and providing value for money in the work of the Authority. In this plan we make frequent references to 'regulation and registration' to acknowledge that our functions cover the work of the professional regulators and of the accredited registers.

In addition to our core duties, this plan describes our work to make professional regulation better and fairer. In terms of better, this means ensuring our work adds value to regulators, accredited registers and registrants, helping them to do an even better job in the interests of patients, service users and the wider public. It also means championing the reform of professional regulation, and supporting the implementation of that reform, in order that regulators and accredited registers can make a greater contribution to safer care for all. Making the system fairer relates to our commitment to equality, diversity and inclusion (EDI). This means promoting and monitoring EDI in our work and in those we oversee, so that issues of unfairness and harm in regulation and registration are resolved and that improvements are seen in outcomes for all patients and service users.

This strategic plan also includes our work to deliver and support the recommendations from our Safer care for all report, published in September 2022. We will work with regulators, accredited registers, stakeholders in health and social care, patients, service users and governments to take forward these recommendations to improve the safety and quality of care for all.

Read the Report – ***Professional Standards Authority strategic plan 2023 to 2026 (web accessible)***

Background Report – ***Safer care for all***

MHRA Corporate Plan 2023 to 2026

JULY 18, 2023

MHRA – July 2023

Focusing on keeping patients safe and enabling access to high quality, safe and effective medical products. Contents include the priority actions and activities which the agency will take forward to ensure delivery of the statutory role and functions of the agency.

Medicines and Healthcare Products Regulatory Agency: Corporate Plan 2023 to 2026

From Inception to Implementation: A Year of Integrated Care Systems

JULY 18, 2023

Care England – July 2023

This study seeks to investigate how Integrated Care Systems have developed since July 2022, with a specific focus on how they have managed and overcome pressures associated with the planning, coordination and commissioning of health and care services. Understanding these systems and their key pressure points will allow wider system partners to steer improvement across regions through best practices and partnerships across both short and long-term pressures.

Read the report – ***From Inception to Implementation: A Year of Integrated Care Systems***

Digital transformation in the NHS – Report Summary

JULY 18, 2023

Health and Social Care Committee – June 2023

Successive Governments have recognised the importance of moving the NHS onto a digital footing. "Digital transformation" encompasses "digitising" services and processes that have traditionally been delivered physically, and greater use of innovative approaches to care that are enabled by advances in technology. Digital transformation is vital for the long-term sustainability of the health service: the Department of Health and Social Care (the Department) and NHS England believe that a shift to digital channels (such as the NHS App) is necessary to delivering priorities such as reducing care backlogs and improving access to primary care. Digital can also deliver improvements in care to patients, ranging from increased convenience to access to cutting-edge treatments and diagnostics.

Read the report – ***Digital transformation in the NHS – Report Summary***

Medical Evolution – Measures to improve the interface between primary and secondary care

JULY 18, 2023

Policy Exchange – 29th June 2023

The interface between primary and secondary care is the space of a growing volume and variety of activities for the NHS, ranging from referrals to specialist care, diagnostic testing and medicines management. An effective and efficient interface has never been more important, but new analysis from Policy Exchange finds the equivalent of 15 million GP appointments per year are spent dealing with issues in care management between GP practices and hospitals, creating frustration and patient safety issues *Medical Evolution* sets out twenty recommendations which seek to ensure that the interface is proactively managed in the future.

Measures proposed range from providing patients with greater transparency about referral decisions so they can 'track' who is responsible for their care to significantly enhancing communication capabilities between clinicians.

The report also calls for the development of hybrid doctor roles – 'interface specialists' – able to work more routinely across hospitals and GP practices and for a massive boost to research activity in primary care to deliver the latest treatments and technologies through a new "Academic Primary Care Accelerator".

Read the Report – ***Medical Evolution – Measures to improve the interface between primary and secondary care***

Fit for the Future: A Modern and Sustainable NHS Providing Accessible and Personalised Care for All

JULY 17, 2023

Tony Blair Institute for Global Change; 2023.

This report proposes how we can keep the principle of health care based on need not on the ability to pay – the originating principle of the NHS – but change radically the way the system works, to incorporate not only what modern technology makes possible, but also the best from health-care systems around the world

Read the Report – ***Fit for the Future: A Modern and Sustainable NHS Providing Accessible and Personalised Care for All.***

Integrated urgent and emergency care pathway maturity self-assessment

JULY 17, 2023

NHS England – July 2023

The delivery plan for recovering urgent and emergency care services sets the ambition to deliver improvements to emergency waiting times and patient experience.

To support these sustained improvements, systems and their healthcare providers across all tiers are asked to self-assess themselves to help identify the maturity of their services and strengthen their improvement plans. These improvements will be supported by a variety of tools and support made available through NHS Impact throughout 2023/24.

Self-assessment process

Ahead of this winter, each Integrated Care Board (ICB) is asked to carry out a self-assessment exercise against nine of the high impact interventions outlined below:

In hospital:

- Same Day Emergency Care
- Acute Frailty Services
- Acute Hospital Flow
- Community Hospital Flow

Out of hospital:

- Intermediate Care
- Virtual Wards
- Urgent Community Response
- Acute Respiratory Illness Hubs
- Single Point of Access

Further information – ***Integrated urgent and emergency care pathway maturity self-assessment***

iUEC recovery champions guidance -Systems are being asked to nominate iUEC Recovery Champions who will support systems in these goals and also have the chance to develop themselves through training and peer-to-peer support and networking.

UEC (Urgent & Emergency Care) recovery plan delivery and improvement support

JULY 17, 2023

NHS England – July 2023

Today, we are launching the first of our NHS Improving Patient Care Together (NHS Impact) Programmes relating to the UEC Recovery Plan.

NHS Impact is our national programme to support the use of evidence-based quality improvement in every system and provider. We have developed this universal support offer for the UEC Recovery Plan following feedback from regions, systems and providers to assist you with improvement across the integrated UEC (iUEC) pathway.

The delivery plan for recovering urgent and emergency care (UEC) was published in January 2023 and set two key ambitions for 23/24:

- Patients being seen more quickly in emergency departments: with the ambition to improve to 76% of patients being admitted, transferred or discharged within four hours by March 2024, with further improvement in 2024/25.
- Ambulances getting to patients quicker: with improved ambulance response times for Category 2 incidents to 30 minutes on average over 2023/24, with further improvement in 2024/25 towards pre-pandemic levels.

We know that there has been good progress in developing local plans and ICBs have been working with colleagues across the system and with regional teams to prioritise local improvements to deliver these ambitions.

Following our letter in May confirming your tiering allocation, we are now able to launch our universal support offer. The offer aligns all of our iUEC improvement offers, including EECIST and GIRFT and has been co-produced with regional, system and provider colleagues, building on learning from and feedback on last year's Winter Improvement Collaborative.

Supporting the UEC Recovery plan there are 10 high impact initiatives that evidence shows will enable systems to make significant progress in advance of winter in the delivery of improved iUEC performance (Annex A). We ask that systems select four of the ten priority initiatives, at each place level, where engagement will help them to make substantial progress in maturity in advance of winter. Systems may choose more or fewer of the priority initiatives in consultation with the region.

Further information – ***UEC recovery plan delivery and improvement support***

delivery plan for recovering urgent and emergency care (UEC)

Five principles for implementing the NHS Impact approach to improvement in England

JULY 17, 2023

Health Foundation – 21st July 2023

Key points

- The NHS is facing an unprecedented range of workforce, financial and performance pressures. The time has come to think and act differently and to do so at pace. What is needed is a strategy and management system capable of maximising the impact and spread of the many promising NHS-led innovations, service improvements and new technologies.
- The new NHS Impact approach to improvement could help to meet this need. It rightly articulates the importance of taking an aligned and integrated approach to improvement delivery and capability building across NHS provider organisations and integrated care systems (ICSs). Carefully implemented it could help to tackle the NHS's most entrenched challenges, such as improving flow along urgent and emergency care pathways and improving GP access.
- To support the implementation of the NHS Impact approach to improvement by provider, ICS and national leaders, this long read sets out five guiding principles and some recommendations.
- Given the many challenges facing providers and ICSs, and the complexity involved in driving system-wide improvement, NHS England and its partners need to be realistic about the pace at which the improvement approach can be implemented. They should also take account of the different levels of improvement skills, knowledge, infrastructure and cultural maturity between organisations and care sectors, which could lead to uneven progress in implementing the improvement approach.
- Efforts to build learning processes and cultures across and between ICSs, which are vital in sustaining improvement across systems, need to be prioritised. Meanwhile, provider and integrated care board (ICB) leaders need to strengthen their strategic ambidexterity – the ability to balance short-, medium- and long-term strategic and operational priorities.
- The NHS Impact approach to improvement should be the defining way of doing things for providers, ICSs and national bodies. For this to happen it needs to become a centrepiece of national health care policy.

Further information – ***Five principles for implementing the NHS Impact approach to improvement in England***

Progress with the New Hospital Programme

JULY 17, 2023

NAO – 17th July

This report examines whether NHP is being managed in a way that is likely to achieve value for money. To reach our conclusions, we considered the extent to which NHP:

- was designed and set up to manage the programme effectively
- is making progress against its baselines for time, cost and quality
- and is effectively identifying and managing the main risks to successful delivery

Our report is organised in four parts, which cover:

- the need for new hospitals
- progress made by NHP between 2020 and 2023
- issues, risks and opportunities for NHP
- how government reset NHP in May 2023

NHP comprises many local construction schemes. While this report sometimes discusses individual schemes by way of example it does not set out to provide a detailed assessment of each scheme.

Read the Report – ***Progress with the New Hospital Programme***

Nuffield Trust response to NAO report on the New Hospitals Programme

Stretched to the limit: tackling the NHS productivity challenge

JULY 14, 2023

NHS Providers – July 2023

In this report we explore the main barriers trusts are facing as they seek to recover performance and improve productivity. We also consider the financial impact of current pressures and the scale of the efficiency ask, which is even more stretching than in 2022/23.

We look at what trusts are already doing, both within their own organisations and in collaboration with system partners, to improve patient flow, reduce costs, deliver operational efficiencies, and improve productivity.

We also highlight what is needed from government and national bodies, in the short term and long term, to enable NHS providers to deliver the level and quality of healthcare the public expects and deserves.

Read the Report – ***Stretched to the limit: tackling the NHS productivity challenge***

Background Research – Arabadzyha A, Castelli A, Gaughan J, Montes M A, Chalkey M (2023). '***Productivity of the English National Health Service: 2019/20 Update***'. York: Centre for Health Economics, University of York.

Inquiry into radiotherapy and the cancer crisis

JULY 14, 2023

T H E APPG F O R RA D I O T H ERAPY – 2023

This is the second inquiry undertaken by the APPG on Radiotherapy. The first inquiry took place in 2019 before the Covid pandemic and investigated radiotherapy provision's ability to meet demands of that time and anticipated future need.

Read the Report – ***Inquiry into radiotherapy and the cancer crisis***

9th Report – NHS Dentistry – Health and Social Care Committee

JULY 14, 2023

Health and Social Care Committee – 14th July 2023

NHS dentistry is facing a crisis of access, resulting in a decline in oral health. The Government needs to undertake urgent and fundamental reform if people are to receive the dental and oral healthcare they need. It is frustrating to have to return to recommendations made by our predecessor Committee fifteen years ago that still haven't been implemented.
Rarely has an inquiry been more necessary. Throughout the course of this inquiry, as well as in our roles as constituency Members of Parliament, we have heard stories of people in pain and distress due to being unable to see an NHS dentist. This is totally unacceptable in the 21st Century.

Read the Report – ***NHS dentistry***

National training survey: 2023 results – GMC

JULY 14, 2023

GMC – 2023

This annual survey was completed by more than 70,000 doctors across the UK who are either in training or act as trainers. It included questions on discrimination for the first time this year, uncovering worrying insights into the experiences of trainees. Though most doctors in training say they work in supportive environments, more than a quarter (27 per cent) said they've experienced micro-aggressions, negative comments or oppressive body language from colleagues

Read the Survey – ***National training survey: 2023 results***

The birth charter for women with involvement from children's social care

JULY 14, 2023

Birth Companions – July 2023

This charter sets out how services and systems in England should support all women involved with children's social care from conception to their child's second birthday – the period known as the '1001 critical days'. It outlines 14 principles to help protect women's rights to safe, fair and compassionate care, and calls for a national health and social care pathway for pregnant women and mothers of infants who are subject to pre-birth or parenting assessment, or child protection proceedings

Further information – ***The Birth Charter for women with involvement from children's social care***

A picture of health? Examining the state of leadership and management in healthcare

JULY 14, 2023

Social Market Foundation – July 2023

The UK's health care system lags behind those of many comparable countries, despite signs of slow improvement in some areas in the years before the pandemic. This report examines the role that better leadership and management can play in both lifting up the tail of underperforming health care providers and fostering more 'outstanding' health care providers, so that health care outcomes in this

country are much closer to those of the best systems in the world.

Further information – ***A picture of health? Examining the state of leadership and management in healthcare***

Investigation highlights gaps in care for those with life-limiting illnesses

JULY 13, 2023

HSIB – 13th July 2023

Palliative and end of life care is 'variable and inequitable' across the NHS in England, says our latest report.

The report sets out an investigation we undertook examining the quality and consistency of palliative care provided to adults. Since 2004, and even with a national strategy in place since 2008, numerous publications have highlighted concerns about the limitations of the delivery of palliative and end of life care. These limitations may be more noticeable in areas where funding for services is limited or where care is being delivered across wide geographical areas.

Our investigation offers a system-based lens on the delivery of palliative and end of life care, and why that delivery does not always meet people's needs or what they should expect to receive.

Read the Report – ***Variations in the delivery of palliative care services to adults***

Epilepsy12 organisational and clinical audits report, England and Wales (2020-22)

JULY 13, 2023

Epilepsy12 – July 2023

The National Clinical Audit of Seizures and Epilepsies for Children and Young People (Epilepsy12) has published its latest report on combined organisational and clinical audits for England and Wales. Based on data relating to 2020-22 (cohort 4), it found that more children and young people with epilepsy are receiving input from epilepsy specialist nurses and paediatricians, but there remain some children without such access (and rates of wider involvement from other key health professionals remain low).

More specifically, the proportion of children and young people diagnosed with epilepsy who received input from a paediatrician with expertise within the first year of care increased from 88% in cohort 3 to 91%. However, only 21% were seen within 2 weeks of referral, as recommended by NICE guidelines (with 13% waiting more than 16 weeks). Other key findings include:

- Some children and young people with epilepsy may be missing out on, or having a delayed identification of, mental health conditions, and 'anxiety' in particular may be under-reported
- There was a higher proportion of children and young people diagnosed with epilepsy living in the most deprived areas (most deprived quintile), compared to others
- Few children and young people had evidence of a school Individual

Healthcare Plan (IHP), with the documented use of school IHPs having increased little since cohort 1 (5% increase).

This report also contains examples of the work of the Epilepsy12 Youth Advocates group, who champion ways to improve care for children and young people with epilepsy.

Read the Report – ***Epilepsy12 organisational and clinical audits report, England and Wales (2020-22)***

Socioeconomic differences in the impact of oesophago-gastric cancer on survival in England

JULY 13, 2023

NOGCA – July 2023

The National Oesophago-Gastric Cancer Audit (NOGCA) has published a report on *Socioeconomic differences in the impact of oesophago-gastric cancer on survival in England* which looks at the relative survival among 39,167 patients diagnosed between April 2013 and March 2017. It found that relative survival of all patients with oesophago-gastric *(*OG) cancer was poor among the NOGCA cohort, at less than 20% at five years from diagnosis. Among patients with a plan for curative treatment, 5-year relative survival was over 40%.

However, there was a socioeconomic gradient in relative 5-year survival across the deprivation groups, from 19.8% in the least deprived group to 15.4% in the most deprived. A gradient was also evident among patients who had a plan for treatment with curative intent (43.2% in the least deprived and 40.3% in the most deprived group), and at one year from diagnosis among patients with a non-curative treatment plan (28.6% in least deprived and 25.4% in most deprived). A greater proportion of patients in the least deprived group had a plan for curative treatment (41% vs 24% in most deprived), but differences in stage at diagnosis were not observed across the deprivation groups.

After adjusting for performance status, the "deprivation gap" in 5-year relative survival was reduced, with the adjusted relative survival being estimated at 18.4% in the least deprived group and 17.9% in the most deprived. This suggests that patient fitness makes an important contribution to the observed differences in relative survival among patients with OG cancer in different socioeconomic deprivation groups.

Read the Report – ***Socioeconomic differences in the impact of oesophago-gastric cancer on survival in England***

Deaths of children and young people due to traumatic incidents (NCMD)

JULY 13, 2023

NCMD – July 2023

The National Child Mortality Database (NCMD) has published its latest thematic report on child deaths related to trauma. Covering vehicle collisions, drownings, violence, maltreatment and unintentional injuries, it is based on data from April 2019 to March 2022.

There were 644 deaths of children and young people due to traumatic events, an overall rate of 17.72 deaths per 1 million children per year. The death rate was highest for children under 5 and for 15-17 year olds, as well as for males. Risk of death also differed according to ethnicity of the child, the level of deprivation where they lived, and the season of the year –

though living in urban or rural environments did not appear to affect the overall risk. Other key findings include:

- Death as a result of a vehicle collision was the most common cause of traumatic death for children (5.81 deaths per 1 million children per year)
- The next most common cause was violence and maltreatment (4.40 deaths per 1 million children per year)
- The risk of drowning was estimated at 2.31 deaths per 1 million children per year.

This report contains a number of recommendations for health and care practitioners and policy makers as well as for those from other sectors eg education. These include ensuring that all primary school children receive road safety education, and that children unable to access statutory or private swimming and water safety tuition are given class-based water safety education.

Read the Report – ***Deaths of children and young people due to traumatic incidents***

Making the cut? Review of care of patients undergoing surgery for Crohn's Disease (NCEPOD)

JULY 13, 2023

NCEPOD – July 2023

The National Confidential Enquiry into Patient Outcome and Death (NCEPOD) has published a review of the care received by patients aged 16 and over undergoing surgery for Crohn's Disease titled *Making the cut?*. Based on data from two periods (1 September 2019 to 29 February 2020 and 1 September 2020 to 28 February 2021), analysis was undertaken on questionnaires from 553 clinicians, 414 sets of case notes, and 138 organisational questionnaires, all supported by qualitative data from patient surveys and focus groups.

The report found, for patients with drug resistant Crohn's disease, surgery should be considered earlier in the treatment pathway, instead of surgery being perceived as a failure of medical management. It states that, once a decision to perform surgery has been made, it should be undertaken within a month to prevent patients on elective waiting lists deteriorating and requiring emergency surgery. Other key messages include:

- Holistic support should be provided for all patients with Crohn's disease, as they have many wider health needs e.g. psychological, dietary and peer support
- Medication for Crohn's disease should be managed effectively at all stages of the pathway, and
- All multidisciplinary team discussions should be documented in the patient's clinical record at the time of the meeting, with a summary provided to the patient and their GP.

The report makes a number of recommendations which highlight areas that are suitable for regular local clinical audit and quality improvement initiatives by those providing care to this group of patients. It goes on to suggest that the results of such work should be presented at quality or governance meetings and action plans to improve care should be shared with executive boards.

Read the Report – ***Making the cut? Review of care of patients undergoing surgery for Crohn's Disease (NCEPOD)***

National Audit of Care at the End of Life (NACEL) 2022/23 report

JULY 13, 2023

NACEL – July 2023

The National Audit of Care at the End of Life (NACEL) has published its latest report. Based on 7,620 case note reviews, 3,600 quality survey responses and 11,143 completed staff reported measures in England and Wales, this report sets out the findings of the fourth round of NACEL, which took place in 2022. Key findings include:

- The possibility that the patient may die within the next few hours/days was recognised in 87% of cases audited, consistent with 2021, and
- The median time from recognition of dying to death was recorded as 47 hours (41 hours in 2019), providing a greater opportunity to realise individual wishes for end of life care.

Read the Report – ***National Audit of Care at the End of Life (NACEL) 2022/23 report***

National Paediatric Diabetes Audit Admissions report (NPDA)

JULY 13, 2023

HQIP – July 2023

The National Paediatric Diabetes Audit (NPDA) has published a Report on hospital admissions of children and young people with diabetes, 2015-2020. Based on 38,095 diabetes related admissions between 1 April 2015 and 31 March 2020, it found that all cause admission rates remained constant in England and Wales, despite a downward trend in national HbA1c from 2015/16 to 2019/20. However, there was considerable regional variability.

The report also found that rates of diabetic ketoacidosis (DKA) at diagnosis of Type 1 diabetes increased over five years. Other key findings include:

- Lower rates of admission with DKA, not at diagnosis, were associated with lower HbA1c and use of real time continuous glucose monitoring (rtCGM) in children and young people with Type 1 diabetes, and
- Children and young people with Type 1 diabetes were more likely to be admitted for diabetes related reasons if they were female, of Black ethnicity, or were living in more deprived areas, with longer duration of diabetes associated with higher risk of hypoglycaemia and diabetic ketoacidosis (DKA) admission not at diagnosis.

Read the Report – ***National Paediatric Diabetes Audit Admissions report (NPDA)***

Integrated urgent and emergency care pathway maturity self-assessment

JULY 13, 2023

NHS England – 13th July 2023

The delivery plan for recovering urgent and emergency care services sets the ambition to deliver improvements to emergency waiting times and patient experience.

To support these sustained improvements, systems and their healthcare providers across all tiers are asked to self-assess themselves to help identify the maturity of their services and strengthen their improvement plans. These improvements will be supported by a variety of tools and support made available through NHS Impact throughout 2023/24.

Integrated urgent and emergency care pathway maturity self-assessment

Integrated urgent and emergency care pathway maturity self-assessment form

The structure of the NHS in England

JULY 12, 2023

House of Commons Library – 10th July 2023

This briefing provides an overview of funding and accountability arrangements within the NHS in England. It also highlights issues including patient safety, NHS funding and performance

Read the Research – ***The structure of the NHS in England***

Medical evolution: measures to improve the interface between primary and secondary care

JULY 12, 2023

Policy Exchange – 2023

The interface between primary and secondary care is the space of a growing volume and variety of activities for the NHS, ranging from referrals to specialist care, diagnostic testing and medicines management. An effective and efficient interface has never been more important, but this analysis finds the equivalent of 15 million GP appointments per year are spent dealing with issues in care management between GP practices and hospitals, creating frustration and patient safety issues. The report sets out 20 recommendations that seek to ensure that the interface is proactively managed in the future.

Read the Report – ***Medical evolution: measures to improve the interface between primary and secondary care***

Review of neonatal assessment and practice in Black, Asian and minority ethnic newborns: Exploring the Apgar score, the detection of cyanosis, and jaundice

JULY 12, 2023

NHS Race and Health Observatory – July 2023

A new review published today by the NHS Race and Health Observatory outlines challenges in neonatal care for Black, Asian and minority ethnic babies, alongside clear recommendations on tackling them.

Tests and assessments that indicate the health of newborns, moments after birth, are limited and not fit-for-purpose for Black, Asian and ethnic minority babies, and need immediate revision according to the NHS Race and Health Observatory.

Neonatal assessments, including the Apgar score, a quick observation test used to assess babies minutes after birth was developed in 1952, and is now considered out of date by many healthcare professionals. Based on a score of 1 to 10, with a high Apgar score indicating good health for babies, minutes following birth, the assessments are used as standard by healthcare professionals regardless of a baby's skin tone and can give misleading scores.

The review also highlights particular concerns around perinatal practices including the assessment of cyanosis and jaundice – the development of which has also been based upon White European babies, and normalised regardless of their applicability to diverse populations and neonates with varying skin tones.

The review presents recommendations for policy, practice and research.

View Full Report – ***Review of neonatal assessment and practice in Black, Asian and minority ethnic newborns***

Can AI help paramedics reduce the number of ambulance journeys?

JULY 12, 2023

NIHR – 12th July 2023

Paramedics could play a key role in reducing hospital admissions, which is one of the Department of Health and Social Care's priorities. Previous work suggests that, with appropriate support, up to 1 in 3 ambulance journeys to A&E could be avoided. This could reduce ambulance handover queues and NHS backlogs.

But it can be difficult for us to decide who to take to A&E. Paramedics manage complex and varied problems, including severe mental illness. We convey people who need emergency hospital care but also those with non-emergency problems such as a mild infection. When treating an older, frail patient, with many health problems, how do we decide what care they need at that precise moment? Even if I am fairly confident that someone's condition is not serious, I may take them to A&E, just in case. We often transport more people than necessary.

Artificial intelligence (AI) could be an excellent tool to support our work, and help us decide that someone can safely stay out of hospital. With this in mind, my research team set out to develop a tool to predict which ambulance patients do not need to attend A&E. Existing transport decision tools help paramedics identify the people most likely to need emergency care. They are less helpful in deciding who does not need to attend A&E; evidence suggests they are no better than clinicians' decision-making.

Further information – ***Can AI help paramedics reduce the number of ambulance journeys?***

This blog is based on: Miles J, and others. ***The Safety INdEx of Prehospital On Scene Triage (SINEPOST) study: The development and validation of a risk prediction model to support ambulance clinical transport decisions on-scene***. *PLOS One* 2022;17: e0276515.

Research outlining a modified definition of an avoidable attendance used in this study: O'Keeffe C, and others. ***Characterising non-urgent users of the emergency department (ED): A retrospective analysis of routine ED data***. *PLOS One* 2018;13: e0192855.

A review of existing research on models that predict the need for emergency care: Miles J, and others. ***Using machine-learning risk prediction models to triage the acuity of undifferentiated patients entering the emergency care system: a systematic review***. *Diagnostic and Prognostic Research* 2020;4: 1 – 12.

Supporting early discharge from hospital through a trust-led virtual ward: Central London Community Healthcare NHS Trust – Case Study

JULY 12, 2023

NHS Confederation = July 2023

Insights on how the Wandsworth and Merton hospital at home team set up one of the first community trust-led virtual wards in the country.

Case Study – ***Supporting early discharge from hospital through a trust-led virtual ward: Central London Community Healthcare NHS Trust***

The size and structure of the adult social care workforce in England Workforce supply and demand trends 2022/23

JULY 12, 2023

Skills for Care – July 2023

Workforce supply and demand is a key issue for the adult social care sector and in recent years workforce supply has experienced significant fluctuations due to policy changes and external factors. The information in this short report, provides the latest figures and also context surrounding this topic.
This report looks at changes in the workforce since the start of the COVID-19 pandemic, and before where relevant, using Skills for Care's workforce estimates sector between 2012/13 and 2022/23.

It also shows more recent changes between March 2023 and June 2023 using Adult Social Care Workforce Dataset (ASC-WDS) data completed by independent sector employers during that period. This information has not been weighted to represent the whole sector but should be indicative of recent changes and developments. Skills for Care is continuing to track these metrics every month. This information can be found on the workforce intelligence website.
Skills for Care has also included qualitative information and evidence gathered from care providers to add context to the statistics.

Read the Report – ***The size and structure of the adult social care workforce in England Workforce supply and demand trends 2022/23***

Nuffield Trust response to Skills for Care report on the social care workforce

Creating efficiencies by optimising patient pathways: North Staffordshire Combined NHS Trust

JULY 11, 2023

Healthcare Financial Management Association (HFMA) – July 2023

This case study outlines how the memory service at North Staffordshire Combined NHS Trust worked with the costing team to identify and address bottlenecks in the clinical pathways that were delaying access, assessment and diagnosis of patients. Following a structured EVO (Engagement Value Outcome) framework the trust was able to reduce CT scan referrals from the service by 30 per cent and reduce the did-not-attend rate for outpatient appointments.

Read the case study – ***Creating efficiencies by optimising patient pathways: North Staffordshire Combined NHS Trust***

Digital transformation in the NHS

JULY 11, 2023

House of Commons Health and Social Care Committee – June 2023

This report warns that the government's ambition for digital transformation in the NHS can only succeed if ministers address mistakes of the past. MPs find reason for optimism in the government's approach; however, the report cites evidence that parts of the health service still lack even the most basic, functioning IT equipment. MPs conclude that a shortage of skilled digital professionals in the NHS presents a barrier to digital transformation, with specialists able to command higher wages or better conditions in the private sector. The report recommends allowing additional pay and bonuses to recruit specialist staff.

Read the Report – ***Digital transformation in the NHS***

The state of health and care of older people in England 2023

JULY 11, 2023

AGE UK – 2023

This report documents how the health and care system is struggling, and too often failing, to meet the needs of our growing older population. It shows how significant numbers of hospital admissions of older people could be avoided if they received help earlier on, before small health problems mushroom into crises requiring urgent clinical support. However, this will only happen if there is a strong political leadership from the government and a drive right across the NHS and local authorities to make it happen.

Read the Report – ***The state of health and care of older people in England 2023***

Dismantling Disadvantage: Levelling up public services for women with multiple unmet needs.

JULY 11, 2023

Agenda Alliance – July 2023

Across the country, women at the sharpest edge of inequality are being systematically failed by the services that should be supporting them. Women experiencing multiple unmet needs face intersecting disadvantages, many of which are shaped by long-term experiences of poverty and deprivation, as well as trauma and abuse

Read the Report – ***Dismantling Disadvantage: Levelling up public services for women with multiple unmet needs.***

England Rare Diseases Action Plan 2023: main report

JULY 11, 2023

Department of Health and Social Care – 10th July 2023

The second action plan setting out how the Department of Health and Social Care and delivery partners will implement the UK Rare Diseases Framework in England.

England Rare Diseases Action Plan 2023: main report

Children and young people's mental health: An independent review into policy success and challenges over the last decade

JULY 10, 2023

Children and Young People Mental Health Coalition – 2023

This report by the Children and Young People's Mental Health Coalition considers the policy landscape in England in relation to children and young people's mental health over the last decade, and reviews progress relating to implementation and impact. The report is informed by a rapid review of policy which was carried out between January and March 2023. These findings reflect the view of the Coalition, not the LGA.

Read the Report – ***Children and young people's mental health: An independent review into policy success and challenges over the last decade***

RCN Annual Review 2022

JULY 10, 2023

RCN July 2023

This Annual Review celebrates the activities and achievements of the RCN during 2022, with a clear timeline and description of the goals and priorities for the year.

RCN Annual Review 2022

Improving patient safety culture – a practical guide

JULY 10, 2023

NHS England – 10th July 2023

This guide brings together existing approaches to shifting safety culture as a resource to support teams to understand their safety culture and how to approach improving it.

Improving patient safety culture – a practical guide

Case study: Derbyshire Integrated Neighbourhood Team reduces ambulance call outs and hospital stays

JULY 10, 2023

NHS England – 10th July

An integrated neighbourhood team approach in Derbyshire which led to 24,000 visits last year saw a reduction of 2,300 category 3 ambulance call outs and reduced hospital stays by 1,400. Team Up Derbyshire, part of Derby and Derbyshire Integrated Care System, works across health and social care to see all people in a neighbourhood currently unable to leave home without support. They aim to create more capacity without creating a new service by bringing together all partners.

Derbyshire Integrated Neighbourhood Team reduces ambulance call outs and hospital stays

Guidance, pathways and case studies to support improvements in ENT surgery

JULY 7, 2023

Getting It Right First Time (GIRFT) – July 2023

A range of new resources for teams working to provide ear, nose and throat surgery is now available from the Getting It Right First Time (GIRFT) team.

The guidance, pathways and case studies are designed to support improvements in the specialty, offering clinical insight and examples of best practice for teams to emulate.

Further information – ***Guidance, pathways and case studies to support improvements in ENT surgery***

Discharge ready date

JULY 7, 2023

NHS England – July 2023

Letter and guidance about the development of a new metric for discharge to help better record and monitor when patients are ready for discharge.

Discharge ready date letter

Discharge ready date guidance, examples and frequently asked questions

Urology: towards better care for patients with kidney cancer

JULY 7, 2023

Getting It Right First Time – 2023

This guidance, a collaboration between Getting It Right First Time, the British Association of Urological Surgeons and the British Association of Urological Nurses, describes the key features of a good kidney cancer service and lists the quality actions teams can take to bridge any gaps they identify. It also includes a delivery checklist and case studies illustrating good practice.

Further information – ***Urology: towards better care for patients with kidney cancer***

Department of Health and Social Care 2021–22 annual report and accounts

JULY 7, 2023

House of Commons Committee of Public Accounts – 2023

This report concludes that the UK Health Security Agency (UKHSA) was set up with no formal governance and weak financial controls. It finds that the £3.3 billion NHS Test and Trace inventory transferred to UKHSA cannot be properly accounted for and that no clear plan exists for a national emergency stockpile for any future pandemic, while the Department of Health and Social Care has inadequate controls over existing PPE stock.

Read the Report – ***Department of Health and Social Care 2021–22 annual report and accounts***

The role of electronic bed management technology in driving capacity improvements

JULY 7, 2023

HSJ – June 2023

The NHS is not alone in needing to address operational challenges, staff shortages and growing elective care backlogs. Health services globally are looking at ways to serve as many patients as possible in the most efficient and effective manner. Improving and optimising bed management is critical to addressing the challenges that hospitals and health systems are facing globally. Currently, however, the information and processes required to ensure the effective management of beds across both acute trusts and the wider system do not work effectively together. A reliance on manual and paper-based processes, white boards, phone calls and dedicated bed management staff walking around a hospital trying to find empty beds is an inefficient way of capturing and sharing data, adding to both delays and staff pressures.

There is growing recognition that a more sophisticated approach is required to manage the complex operational logistics supporting patient flow. This can be done through Care Co-ordination Centres underpinned by healthcare Operations Platforms and electronic bed management technology, which have a vital role to play in the NHS digitalisation strategy. A recent King'sFund article emphasised the importance of interoperability, multidisciplinary collaboration and effective use of different, yet integrated, platforms to address the difficulties facing healthcare systems and patients accessing care.

Care Co-ordination Centres, underpinned by electronic bed management technology, have the potential to increase the visibility of vital information including available resources, bed utilisation, staffing workflows and discharge measures. With a single view of the entire trust, fast information sharing and efficient workflow optimisation, care access, care delivery and care transitions can be more effectively managed to the benefit of both patients and staff.

Further information – ***The role of electronic bed management technology in driving capacity improvements***

National guideline for stroke for the United Kingdom & Ireland

JULY 7, 2023

RCP – 2023

Out of 538 recommendations in this guideline, almost 300 have been updated, added or endorsed since
the 2016 edition

Read the guideline – ***National guideline for stroke for the United Kingdom & Ireland***

New guidance outlines 'Six steps to better care for older people in hospital'

JULY 7, 2023

Getting It Right First Time – June 2023

Today the British Geriatrics Society (BGS) and Getting It Right First Time (GIRFT) published new guidance aimed at supporting hospital teams to improve care for older people living with frailty.

Six Steps to Better Care for Older People in Acute Hospitals is designed to accompany the new GIRFT Hospital Acute Care Frailty Pathway. It offers detailed measures teams should take to improve care and reduce 'hospital-acquired dependency' for those living with frailty, as well as stressing that interventions should be monitored and linked more widely to community-based services.

In 2021, GIRFT published its national report for geriatric medicine, following a review led by Dr Adrian Hopper. The report focused mainly on the management of frailty in older people, the area of geriatric medicine where there is the greatest risk of avoidable harm and biggest scope for improvement.

It showed that demand for frailty services is growing as people live longer; the number of over-85s in England with dementia or other long-term health conditions is predicted to almost double from 233,000 in 2015 to 446,000 in 2035.

Pre-COVID data shows that between 5% and 10% of people attending A&E departments and 30% of patients in acute medical units are older and living with frailty, with more than 4,000 admissions daily of people with frailty, for reasons such as falls, minor infections and reactions to medications.

The report called for a collaborative approach across whole systems, including primary and secondary care, care homes, community services, ambulance services, local authorities and the voluntary sector. The report stated that this approach should be implemented as best practice to help prevent the progression of frailty and avoid the need for older people to be admitted to hospital where more effective care can be offered elsewhere.

Read the Report – ***Six steps to better care for older people in hospital***

Impact Report – Queen's Nursing Institute – 2022

JULY 6, 2023

Queen's Nursing Institute – 2023

The nursing profession has faced huge demands during 2022, including workforce pressures that have persisted even as the Covid pandemic has weakened its grip. Our work throughout 2022 demonstrates the flexible and responsive nature of the QNI, adapting our resources to deliver our key objectives, supporting nurses working in all community settings in every way we can.

We have continued to champion the role of nurses working in the community, in primary care and social care, and worked to raise their profile with commissioners, policy makers, media and the public. We have growing evidence that our strategy is contributing to greater recognition of the indispensable role and impact of community nurses in every field of practice. Community nurses are vital if health services are to manage the increasingly complex needs of the communities served.

We have also supported a significant number of nurses with financial assistance in times of need, and provided emotional support through our TalktoUs listening service, staffed by trained Queen's Nurses.

This impact report captures some highlights of our efforts to provide meaningful support during these challenging times. I would like to thank all community nurses for their dedication and commitment to the communities they serve.

I also encourage all nurses to participate in our many initiatives and projects in 2023. We are an inclusive professional organisation that embraces all students and registered nurses at all levels of experience, working in every setting and field of practice in the community.

Read the Report – ***Impact Report***

NHS at 75 Insights Report

JULY 6, 2023

National Voices – July 2023

July 5 2023 marks the 75th anniversary of the NHS, and we have published our report on this date to mark this important anniversary. It is important that we mark and celebrate all that has been achieved over the last 75 years and look forward to the future.

In May 2023, National Voices brought together around 50 members and people with lived experience in response to an invitation from the NHS Assembly to offer insights and recommendations on future directions for the NHS in the lead up to its 75th anniversary.

Insights were sought around five key themes, and discussions were informed by an overview from existing evidence prepared by Healthwatch England.

The themes were:

1. Prevention
2. Personalisation
3. Participation:
4. Primary and community care
5. Partnerships

Our report found that any future developments within the NHS must focus on responding to what matters to people and ensuring that the basic building blocks are in place, such as equity of access and simple communication.

We were delighted that many of our recommendations were reflected in the final report from NHS Assembly. This shows the importance NHS leadership has placed on listening to our members and those with lived experience.

Three key needs were highlighted:

- The NHS must improve how it **communicates** with people about their access options, treatment and ongoing care – we heard that too often communication with the NHS is one-way, and that people do not feel listened to. We also heard of significant failures to meet additional communication needs.
- Work to **build relationships** with people and communities – we heard that too often the NHS asks people to engage on its terms, rather than meeting people where they are and working to establish trust. Good work happened during the pandemic to establish more trusting relationships with communities, often through trusted intermediaries, but progress since has faltered here.
- Focus on **what matters to people** – we heard that people wanted the NHS to listen to their priorities rather than pursuing targets set by the system or imposing its own ideas or systems on people's lives. People understand that the NHS is under pressure, and they know that there will sometimes be limits to what can be done, but too often they feel they have to fight to get the care they want and are too often left to pick up the pieces of a fragmented system.

Advertisements

This report summarises key insights under each theme and offers a set of recommendations for future action to ensure the NHS can continue to deliver in line with its core values.

NHS at 75 Insights Report

Facing workforce shortages and backlogs in the aftermath of COVID-19: The 2022 census of the ophthalmology consultant, trainee and SAS workforce

JULY 6, 2023

The Royal College of Ophthalmologists – March 2023

Key Findings

Workforce shortages remain a serious problem for NHS ophthalmology services across the UK in the aftermath of COVID-19, and have worsened since our last census in 2018. These contribute to and exacerbate the long
outpatient backlogs faced by eye units, which 81% of NHS eye units say they have become more concerned about over the last 12 months. The considerable growth of independent sector providers (ISP) delivering NHS-funded cataract surgery is also having a significant impact on ophthalmology services and its workforce. Although views are mixed, a majority of eye units say that the impact of ISPs on patient care in their unit has been negative. Increasing numbers of consultants also plan to spend more time working in ISPs over the next five years.
The census also found a clear desire among Specialty and Associate Specialist (SAS) doctors for greater recognition and simpler routes for progression in ophthalmology. The work being led by the GMC to reform the

CESR process, which RCOphth is contributing to, should support this ambition

Read the Report – ***Facing workforce shortages and backlogs in the aftermath of COVID-19: The 2022 census of the ophthalmology consultant, trainee and SAS workforce***

Improving the visibility of paediatric ophthalmology: A workforce report

JULY 6, 2023

The Royal College of Ophthalmologists – June 2023

Ophthalmology services across the UK face a significant capacity challenge, and paediatric ophthalmology is no exception. Capacity shortages in the sub-specialty are driven by difficulties in the recruitment and retention of staff, significant patient backlogs, and the impact on ways of working adopted during the COVID pandemic. Alongside these broader challenges facing ophthalmology, paediatric ophthalmology also faces a range of unique pressures relating to the delivery of paediatric care. As a result, paediatric ophthalmology services are particularly vulnerable to the capacity pressures in the system. To help give voice to the paediatric ophthalmology sub-specialty and ensure issues are addressed, The Royal College of Ophthalmologists' Paediatric Subcommittee undertook a series of interprofessional focus group sessions in November 2022 where colleagues from across the sector explored the challenges facing paediatric ophthalmology, . This briefing details the main challenges facing paediatric ophthalmology as outlined by the focus groups:

1. Patient backlogs and consultant workload
2. COVID ways of working
3. Training, recruitment and retention

To meet these challenges, a set of policy recommendations have been submitted in separate documents to the Education Committee, Training Committee and Quality and Standards Committee respectively, to be taken forward, developed, and implemented by representatives of each committee through several cross-committee task and finish groups. It is hoped by outlining a range of solutions alongside the challenges detailed below, paediatric ophthalmology can be supported to deliver more high quality, timely patient care.

Read the Report – ***Improving the visibility of paediatric ophthalmology: A workforce report***

BHF publishes interim equality, diversity and inclusion (EDI) report

JULY 6, 2023

BHF – July 2023

To mark one year of progress since the launch of the BHF's first equality, diversity and inclusion (EDI) strategy, we have published a new interim report: Igniting Change, One Year On.

Read the Report – ***Igniting Change One Year On 2023***

Background – ***Gender and Ethnicity Pay Gap Repor***t – BHF 2022

NHS virtual ward expansion will see thousands of children treated at home

JULY 6, 2023

NHS England – 5th July 2023

Tens of thousands of children will be able to receive hospital-level care at home thanks to an expansion of virtual wards, chief executive Amanda Pritchard will announce on the 75th anniversary of the NHS.

The hospital at home service – already the largest of its kind in the world – will expand to cover children in every region of England from this month after successfully treating more than 6,400 children over the last year.

Further information – ***NHS virtual ward expansion will see thousands of children treated at home***

Supporting information: Virtual ward including Hospital at Home – NHS England

Liver disease profiles, July 2023 update

JULY 5, 2023

Office for Health Improvement and Disparities – July 2023

New hospital admissions data for liver disease and alcoholic liver disease have been added to the financial year ending 2022. These profiles support local areas by providing data to assess the effect of liver disease in their areas and take preventative action.

Liver disease profiles, July 2023 update

RightCare physical health and severe mental illness scenario

JULY 5, 2023

NHS England – July 2023

This physical health and severe mental illness scenario is part of a series of RightCare scenarios that support local health systems to think strategically about designing evidence-based optimal care for people with high impact conditions.

Further information – ***RightCare physical health and severe mental illness scenario***

Medicines and Healthcare Products Regulatory Agency: Corporate Plan 2023 to 2026

JULY 5, 2023

Medicines and Healthcare products Regulatory Agency – 4th July 2023

Focusing on keeping patients safe and enabling access to high quality, safe and effective medical products. Contents include the priority actions and activities which the agency will take forward to ensure delivery of the statutory role and functions of the agency.

Medicines and Healthcare Products Regulatory Agency: Corporate Plan 2023 to 2026

Digital technology in the NHS: reducing staff pressures, improving care

JULY 5, 2023

NIHR – June 2023

The NHS is the largest employer in the UK with more than 1.4 million employees. Its

workforce is under growing pressure. The population is ageing, increasing demand on healthcare services. The number of staff vacancies are high. The Health Foundation has predicted a shortfall of nearly 1 in 10 (9%) of all NHS workforce posts by 2030 – 2031.

The Department of Health and Social Care has made support for the workforce a key research priority. It is aiming to develop and evaluate technology-assisted workforce solutions both to reduce the burden on staff and to improve patient outcomes. Increased use of technology in healthcare is central to the NHS Long term Plan.

This Collection highlights examples of recent NIHR research that demonstrate ways in which digital technology can improve care while reducing the demands on staff. The technologies include computer decision aids, remote patient monitoring, online support for patients and staff, and virtual reality in psychological therapies.

The research shows that these technologies could bring multiple benefits, both to the workforce, and to patients. They could save healthcare professionals' time, increase the number of people a skilled professional can support, and enable more sustainable workforce models. At the same time, they can promote safer and more personalised care.

The Collection provides useful information for those commissioning and delivering services, including people working across integrated care systems. It sits alongside 2 other Collections: One collection helps members of the public understand digital health technology, the other, upcoming Collection, will describe promising examples of artificial intelligence, or AI, for healthcare.

Further information – ***Digital technology in the NHS: reducing staff pressures, improving care***

Understanding public perceptions and attitudes to the NHS

JULY 5, 2023

NHS Confederation – 5th July 2023

Key findings

- Despite the challenges faced by the service, there remains a **high level of support for the founding principles of the NHS**. A majority agree that the NHS should provide a comprehensive service available to all (87 per cent), remain free at the point of delivery (also 87 per cent) and be funded primarily via taxation (83 per cent).
- **Ratings of how NHS staff are treated are low**, with half (52 per cent) dissatisfied with how well staff are treated in the NHS. This reflects that a majority (81 per cent) say that there are too few frontline staff working in the health service at present.
- While people are supportive of the NHS model, **more are dissatisfied than satisfied with how long they have to wait for certain key services**. They highlight funding, low staffing and social care provision as key enablers to help the NHS improve.
- **The majority do not think the NHS receives enough funding** (69 per cent), though six in ten (61 per cent) think it needs to make big changes to the way it runs and provides services to improve, as well as more money.
- Reflecting the areas of most concern at present, **the public want the NHS**

to prioritise increasing the number of staff working in the NHS (45 per cent) and improving staff wellbeing (30 per cent) in the near future, alongside reducing waiting times for core services (36 per cent want the NHS to prioritise reducing waiting times for A&E; 35 per cent improving waiting times for routine hospital treatment and care; and 32 per cent improving access to face-to-face GP appointments).

- When presented with potential actions the NHS could take to address the challenges it is facing, **the actions the English public think will most help are increasing capacity in social care settings so that people can leave hospital sooner, developing a workforce plan for the number and types of staff the NHS will need to deliver services in the future, and introducing a seven-day work week for all parts of the NHS**, meaning appointments are offered at a wider range of dates and times, including at the weekend.

- **The English, Welsh and Northern Irish public attribute the elective care backlog to a mix of factors**. Most typically believe it has resulted from a lack of staff (49 per cent) and space in social care settings (43 per cent), as well as the cancellation of routine treatment and care during the pandemic (42 per cent), and there not being enough funding for the NHS (40 per cent).

Read the Research – ***Understanding public perceptions and attitudes to the NHS***

Driving better health outcomes through integrated care systems: The role of district councils

JULY 5, 2023

Kings Fund – 4th July 2023

Overview

- District councils have statutory powers over service areas including planning, housing, benefits, and leisure and green spaces, which affect many of the most significant determinants of health. Around 40 per cent of the population of England live in a district council area.

- We interviewed district council officers and integrated care board (ICB) staff in four sites from around England to better understanding the current relationships between local government and ICBs, what good practice looks like, what enables it and the outcomes it produces.

- District councils can play a valuable role within integrated care systems (ICSs) because they can influence the wider determinants of health; can act and react in fast and agile ways; and have strong, close connections with local communities.

- ICB leaders need to ensure prevention is at the heart of ICSs' mission and purpose, create opportunities for district councils to lead, and use district councils to trial new place-based projects.

- District councils need to actively promote the contribution they can make to system working, identify

areas of shared priority with other councils, accept accountability for delivering agreed goals on behalf of the system, and invest in building relationships across the ICS.

- ICSs have the potential to transform the approach taken to health and care in District councils are indispensable strategic partners in delivering population health improvements.

Read the Report – ***Driving better health outcomes through integrated care systems: The role of district councils***

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A range of resources and support is available at DBTH to help you with your improvement and innovation work. Quality Improvement (Qi) means identifying areas where care could be improved, where patient pathways could be made more effective, where things aren't working as well as they could be, or where there are different better ways possible. A quality improvement project enables changes using a simple structured framework, which results in visible and effective improvement.

See the Qi webpage for details about a toolkit to help you, support available from the team, training and links to useful resources too. https://extranet.dbth.nhs.uk/quality-improvement-qi/

This bulletin is repurposed from the Innovation & Improvement Bulletin by The Rotherham NHS Foundation Trust (https://innovationandimprovement.wordpress.com/)